

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee FORTH RIGHT STRATEGY INC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2016		
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 202.77		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56810		
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 17 / 2016		
Name of Federal Candidate SCOTT, TIMOTHY E, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: 00 State: SC		
Calendar Year-To-Date Per Election for Office Sought 114631.67			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee FORTH RIGHT STRATEGY INC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2016		
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 109.14		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56811		
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 17 / 2016		
Name of Federal Candidate LOVE, MIA, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 04 State: UT		
Calendar Year-To-Date Per Election for Office Sought 84933.57			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	311.91
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MACKENZIE, SCOTT B, ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 18 / 2016

Signature

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee FORTH RIGHT STRATEGY INC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2016		
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 1054.49		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56812		
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 17 / 2016		
Name of Federal Candidate HURD, WILLIAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought		89047.75	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee FORTH RIGHT STRATEGY INC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2016		
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 219.01		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56813		
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 17 / 2016		
Name of Federal Candidate GLENN, DARRYL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought		219.01	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1273.50
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee FORTH RIGHT STRATEGY INC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2016		
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 25197.50		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56814		
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 17 / 2016		
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 457184.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address			Amount		
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure		Category/ Type			
Name of Federal Candidate			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	25197.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	26782.91

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